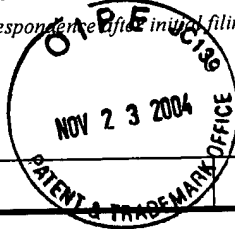


TRANSMITTAL FORM

(to be used for all correspondence with the PTO)



Application Number	09/935,686
Filing Date	8/24/2001
First Named Inventor	Kamiya
Group Art Unit	2122
Examiner Name	Ted T. VO
Attorney Docket Number	11-055

ENCLOSURES (check all that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment / Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition
<input type="checkbox"/> Petition to Convert a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
<input type="checkbox"/> Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Request of Refund
Remarks | <input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
|--|--|--|

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Posz & Bethards, PLC

Signature

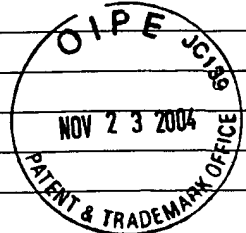
Date

23 November 2004

2122 \$

2122 \$

FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>	
		Application Number	09/935,686
		Filing Date	8/24/2001
		First Named Inventor	Kamiya
		Examiner Name	Ted T. VO
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Group/Art Unit	2122	
TOTAL AMOUNT OF PAYMENT	(\$)	1244	Attorney Docket No. 11-055



METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																							
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																							
<input type="checkbox"/> Deposit Account																																									
Deposit Account Number: 50-1147																																									
Deposit Account Name: POSZ & BETHARDS, PLC																																									
The Commissioner is authorized to: (check all that apply)																																									
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																									
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																																									
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																									
FEE CALCULATION																																									
1. BASIC FILING FEE																																									
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>2001</td><td>790</td><td>395</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>2002</td><td>350</td><td>175</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>2003</td><td>550</td><td>275</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>2004</td><td>790</td><td>395</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>2005</td><td>160</td><td>80</td><td>Provisional filing fee</td><td></td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1001	2001	790	395	Utility filing fee		1002	2002	350	175	Design filing fee		1003	2003	550	275	Plant filing fee		1004	2004	790	395	Reissue filing fee		1005	2005	160	80	Provisional filing fee					
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SUBTOTAL (1) (\$)																																									
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																									
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** or number previously paid, if greater; For Reissues, see above																																									
		Other fee (specify)																																							
		SUBTOTAL (3) (\$)																																							
		980																																							

SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	CYNTHIA K. NICHOLSON	Registration No. (Attorney/Agent)	36,880
Signature		Telephone	(703) 707-9110
		Date	23 November 2004